



Issue Classification 	Application No.	Applicant(s)	
	10/031,925	MCDONNELL, WILLIAM R.	
	Examiner	Art Unit	
	Robert P. Swiatek	3643	

ISSUE CLASSIFICATION											
ORIGINAL					CROSS REFERENCE(S)						
CLASS		SUBCLASS			CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)					
244		63			244	110R	110C				
INTERNATIONAL CLASSIFICATION											
B	6	4	F	1/02							
B	6	4	F	1/04							
				/							
				/							
				/							
(Assistant Examiner) (Date)					<i>Robert P. Swiatek</i> Robert P. Swiatek 6 October 2004 (Primary Examiner) (Date)					Total Claims Allowed: 45	
<i>Cofor</i> 10-20-04 (Legal Instruments Examiner) (Date)										O.G. Print Claim(s) 31	O.G. Print Fig. 3

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant										<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47	
Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original
	1		31		61		91		121		9	151		181	
	2		32		62		92		122		10	152		182	
	3		33		63		93		123		11	153		183	
	4		34		64		94		124			154	6	184	
	5		35		65		95		125			155	7	185	
	6		36		66		96		126			156		186	
	7		37		67		97		127	38	157		187		
	8		38		68		98		128		158		188		
	9		39		69		99		129		159		189		
	10		40		70		100	1	130		160		190		
	11		41		71		101		131		161		191		
	12		42		72		102	2	132		162		192		
	13		43		73		103	3	133		163		193		
	14		44		74		104		134		164		194		
	15		45		75		105		135		165		195		
	16		46		76		106		136		166		196		
	17		47		77		107		137		167		197		
	18		48		78		108		138		168		198		
	19		49		79		109		139		169		199		
	20		50		80		110		140		170		200		
	21		51		81		111	4	141		171		201		
	22		52		82		112		142		172		202		
	23		53		83		113		143		173		203		
	24		54		84		114		144		174		204		
	25		55		85		115		145		175		205		
	26		56		86		116		146		176		206		
	27		57		87		117	5	147	21	177		207		
	28		58		88		118		148		178		208		
	29		59		89		119		149		179		209	8	
	30		60		90		120		150		180		210	12	

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			/								
			/								
			/								
			/								
(Assistant Examiner) (Date)				(Primary Examiner) (Date)				Total Claims Allowed:			
(Legal Instruments Examiner) (Date)								O.G. Print Claim(s)	O.G. Print Fig.		

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant												<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47	
Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original		
13	211		241		271		301		331		361		391				
14	212		242		272		302		332		362		392				
15	213		243		273		303		333		363		393				
16	214		244		274		304		334		364		394				
	215	27	245		275		305		335		365		395				
32	216	28	246		276		306		336		366		396				
33	217		247		277		307		337		367		397				
	218	29	248		278		308		338		368		398				
	219		249	40	279		309		339		369		399				
34	220		250	41	280		310		340		370		400				
22	221	30	251	42	281		311		341		371		401				
	222		252	43	282		312		342		372		402				
	223		253		283		313		343		373		403				
	224		254		284		314		344		374		404				
	225		255	44	285		315		345		375		405				
23	226		256		286		316		346		376		406				
17	227	20	257		287		317		347		377		407				
18	228	31	258		288		318		348		378		408				
24	229	35	259	45	289		319		349		379		409				
19	230	36	260		290		320		350		380		410				
25	231	37	261		291		321		351		381		411				
	232	39	262		292		322		352		382		412				
	233		263		293		323		353		383		413				
	234		264		294		324		354		384		414				
	235		265		295		325		355		385		415				
	236		266		296		326		356		386		416				
	237		267		297		327		357		387		417				
26	238		268		298		328		358		388		418				
	239		269		299		329		359		389		419				
	240		270		300		330		360		390		420				